

Chief Jon Davine
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## FIRE ALARM WORK PERMIT

The applicant must obtain electrical work permit first

Facility Name & Address:			
Owner's Name & Address:			
Contact Person:	Phor	ne #	
Alarm Co. / Electrician performing work: _	Ma.I	Lic. #	
Dates of work are to be done.			
From:	To:		
Description of work to be performe			
Is the building sprinklered:			
Alarm Connection:			_
UL Listed Central Station	Name	e / Location:	
Direct connection via digital		ount #	
Contractors performing work must notify Centris finished, or when work is finished for the day (413-587-1244)			
Fire Alarm Work Permit Fee \$80.00	Paid:	Receipt N	lumber:
Approved By	D	oate	
"Professionalis	m through C	ourage and De	edication"